WGIUPD

GENERAL INFORMATION SYSTEM DIVISION: Office of Health Insurance Programs

GIS 21 MA/17

8/18/21 **PAGE** 1

TO: Local District Commissioners, Medicaid Directors

FROM: Jonathan Bick

Director, Division of Health Plan Contracting and Oversight

SUBJECT: Managed Long Term Care's Involuntary Disenrollment Resumption

EFFECTIVE DATE: Immediately

CONTACT: mltcinfo@health.ny.gov

The purpose of this General Information System (GIS) message is to inform local departments of social services (LDSS) of resumption of allowed involuntary disenrollment reasons listed below for Managed Long Term Care Partial Capitation (MLTCP), Medicaid Advantage Plus (MAP) and Programs for All-Inclusive Care for the Elderly (PACE).

BACKGROUND:

The response to the Families First Coronavirus Response Act (FFCRA), 20 ADM 04 - Coronavirus (COVID-19) – Medicaid Eligibility Processes During Emergency Period, limited the allowed disenrollment reasons for managed care plans to member requested disenrollment, death and no longer a resident of the State.

Subsequent CMS rulemaking and guidance permits State Medicaid programs to resume certain disenrollment processes if comparable coverage is maintained. For further information, please see https://www.medicaid.gov/resources-for-states/disaster-response-toolkit/coronavirus-disease-2019-covid-19/index.html.

ALLOWED INVOLUNTRY DISENROLLMENTS:

The Department of Health (Department) will begin re-instituting certain involuntary disenrollment processes prospectively, effective for disenrollment date of October 1, 2021 and monthly thereafter. MLTC plans may begin submitting disenrollments on September 1, 2021 for the following two Disenrollment Reasons:

• No longer in Medicare product (Enrollee is no longer a member of the Plan's Medicare Advantage Program).

Applicable to MAP. Requires submission of document proof from CMS or ePACES, and expected disenrollment date. MAP plans submit the Managed Long Term Care Involuntary Disenrollment Request Form to New York Medicaid Choice (NYMC).

WGIUPD

GENERAL INFORMATION SYSTEM DIVISION: Office of Health Insurance Programs

8/18/21 **PAGE** 2

GIS 21 MA/17

• Enrollee no longer resides in the plan's service area

Applies to all MAP, PACE and MLTCP plans. Requires evidence of consumer's new residence. MAP, PACE, and MLTCP plans must submit the Managed Long Term Care Involuntary Disenrollment Request Form to NYMC and include dates of when HRA/LDSS was notified of the new address.

Note: Residential Address must be updated by the LDSS in order for the disenrollment to be processed.

TIMELY NOTICE AND REFERRALS:

Plans will be notified monthly of approved disenrollments via the 834 roster process. MLTCP plans will also be notified of auto-assignment for individuals that are mandatory. The date of disenrollment is to be determined prospectively based on the date the disenrollment packet is received and accepted. For example, if accepted prior to the 15th of the month, the disenrollment effective date will be the end of the current month. If on or after the 15th of the month, the disenrollment effective date will be the end of the following month.

As part of the resumption of involuntary disenrollments, the plan must send its Notice of Intention to Disenroll to all enrollees and their authorized representatives for whom it requests disenrollment. Plans send this notice 30 days prior to the requested disenrollment effective date (e.g., September 1, 2021 mailing date for an October 1, 2021 effective date).

Individuals will be notified of their disenrollment by NYMC due to the above reasons. Fair Hearing rights apply to this notice including Aid to Continue. Medicaid members who are disenrolled from their MLTC plan will continue to receive their Medicaid coverage through another MLTC plan or the Medicaid fee for service program.

The LDSS may receive personal care referrals to continue personal care for individuals who move out of their current plan's service area or disenroll from MAP and must accept the referral to continue care for the Medicaid member. The LDSS should continue the current Plan of Care (POC) until a new Community Health Assessment (CHA) is completed and the POC is updated, which should be completed as soon as feasible but no later than the next scheduled reassessment date

The Department will continue to evaluate the resumption of other involuntary disenrollment reasons and will notify the LDSS prospectively.

Please direct any questions to your local district support liaison.